

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KM	7087	11/8
O.I.P.E. CLASSIFIER		?	800
FORMALITY REVIEW		16848	12/70
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
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U.S. PTO  
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TITLE

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Form PTO-436A  
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If more than 150 claims or 150 citations  
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